PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

7629-9154

		CLAIMS A	S FILED -	PART	l		s	MALL EI	NTITY		OTHER	THAN
			(Column_1)		(Column 2)			TYPE ZZ		OR	•	
TOTAL CLAIMS			(1				Γ	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS)/ minus 20=		*			X\$ 9=		OR	X\$18=	
INI	DEPENDENT C	LAIMS	2 minus 3 =		*	·		X43=	·	OR	X86=	-
MULTIPLE DEPENDENT CLAIM PRESENT					· · · · · · · · · · · · · · · · · · ·			+145=		OR	+290=	
* If the difference in column 1 is less than zero, e					"0" in c	olumn 2	L	TOTAL	385	OR	TOTAL	
•	C	LAIMS AS A	MENDED	O - PART II				•	<u> </u>	•	OTHER	THAN
_	r	(Column 1)		(Colum	nn 2)	(Column 3)	SMALL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1	X\$ 9=	•	OR	X\$18=	
AME	Independent	* ENTATION OF ME	Minus	***	CL AUA	=		X43=		OR	X86=	·
	FIRST PRESE		+145=		OR	+290=						
							L	TOTAL			. TOTAL	
		(Column 1)		(Colum	n 2)	(Column 3)	AU	DIT. FEE		,	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	<u>·</u>	=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		Ţ,	145=		OR	+290=	
							AD	TOTAL DIT. FEE		OR 2	TOTAL ADDIT, FEE	
		(Column 1)		(Colum	n 2)	(Column 3)						·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA	F		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	\(\)	(\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	\	(43=	•	OR	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (CLAIM			145=				
- 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR L	+290= TOTAL	
								TOTAL		~~		
***	f the "Highest Nur	nber Previously Painber Previously Pai Der Previously Paid Der Previously Paid	id For IN THIS	SPACE is	less than	3, enter "3."		OIT. FEE			DDIT. FEE	